

ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY (VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

| EPA I.D. NUMBER | | +CTD98 | 189 | 1807 | | | | |
|----------------------|-----|--------|-----|------|------|--------|-----|-------|
| | | SEAR | ROE | BUCK | AUT | CENTER | | |
| | | 1445 | NEW | BRIT | TAIN | AVE | | |
| | | WEST | HAR | TFOR | D | | CT | 06110 |
| | | \$6K | | | | | | |
| INSTALLATION ADDRESS | | 1445 | NEW | BRI | TAIN | AVE | | |
| | - | WEST | HAR | TFOR | D | | CT | 06110 |
| | - 1 | | | | | | 100 | |

EPA Form 8700-12B (4-80)

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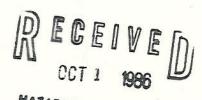
Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

6 For... Approved. OMB No. 2050-0028. Expires 9-30-88 GSA No. 0246-EPA-01

| SEPA Notification of H | nvironmental Proshington, DC 200 | 160 | | Filing No this form here is 3010 of | efer to the Instructions for otification before completing in The information requested required by law (Section the Resource Conservation overy Act). |
|---|--------------------------------------|----------------------------------|---|--|---|
| For Official Use Only | | | | and nece | overy Acq. |
| c | STATE WAST | ments REGION 1 PROCRAMS I | BRANCH | | |
| Installation's EPA ID Number | | Approved | Date Re | eceived o. day) | 000 |
| C 98-189-1807 | T/A C | | 861 | 020 | sec |
| I. Name of Installation | | | | | |
| SEAR KOEDUCK | Au | TO | CEN | TER | |
| II. Installation Mailing Address | | | | | |
| 3/445 NEW Br | 1 A | P.O. Box | AUE | | |
| City of | Town | | | Sta | ate ZIP Code |
| 4 UEST HARTFO | RD | | | | T061110 |
| The Education of Installation | Street or R | oute Number | | | |
| 51445 NEW B- | I IT A | 1 2 | AUE | | |
| City of | RD | Harty | ord 3 | Sta | ate ZIP Code |
| IV. Installation Contact | | | | | |
| Name and Title (last, first, | and job title) | SER | maga | Phone Number | (area code and number) |
| V. Ownership | MARIN | 12516 | | 0 0 7 | |
| A. Name of Installation | n's Legal Owner | | | B. Type | of Ownership (enter code) |
| BEAR ROEDUC | 14 HC | ٥ | | | |
| VI. Type of Regulated Waste Activity (Mark | 'X' in the app | propriate bo | xes. Refer to | instructions | |
| A. Hazardous Waste Activity | T. Service | | B. Use | d Oil Fuel Act | ivities |
| ☐ 1a. Generator ☐ 1b. Less than 1,0 ☐ 2. Transporter | 000 kg/mo. | | pecification Used r'X' and mark ap | | s below) |
| ☐ 3. Treater/Storer/Disposer | | | a. Generator Ma | rketing to Burn | ler |
| 4. Underground Injection | | | b. Other Markete | r | |
| 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below) | | | c. Burner | MAT OF CALL | |
| a. Generator Marketing to Gurner b. Other Marketer c. Burner | | | fication Used Oil First Claims the (| | (or On site Burner) Specification |
| VII. Waste Fuel Burning: Type of Combustio | n Device (ente | er 'X' in all app | ropriate boxes to | indicate type of | f combustion device(s) in |
| which hazardous waste fuel or off-specification used oil. A. Utility Boiler | fuel is burned. S | ee instruction | s for definitions | of combustion of C. Industrial Fu | devices.) |
| VIII. Mode of Transportation (transporters of | STATE OF THE PARTY OF THE PARTY OF | | The second second second second | | imaca |
| ☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Wa | | ner (specify) | | ALCO VINCE | |
| IX. First or Subsequent Notification | | | | | |
| Mark 'X' in the appropriate box to indicate whether thi notification, if this is not your first notification, enter you | s is your installar installation's E | ation's first no PA ID Number | otification of haz | ardous waste a | activity or a subsequent |
| A. First Notification | | | - | | EPA ID Number |

| | | The second secon | ID — Fur Official Use Only | | | | | T/A C | |
|---|---|--|---|-----------------------|--------------------------------|-----------|---------------------------|--|--|
| | | V | | | | | 1 | A | |
| Description of Ha | zardous Wastes /co | ontinued from front) | | 1 2 2 1 | | | | | |
| lazardous Wastes from | m Nonspecific Sources. | Enter the four-digit num | ber from 40 CFR I | Part 261.31 6 | or each lis | ted hazar | dous waste | | |
| rom nonspecific source | es your installation hand | lles. Use additional sheet | s if necessary. | | | | Ante-3-48 | 是音楽 | |
| 1 | 2 | 3 | 4 | | - 5 | | 6 | | |
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| | 8 | 9 | 10 | | 11 | | 12 | 18. Ta | |
| 7 | | | | T | TI | | TIT | | |
| | | | | | | | | | |
| lazardous Wastes fro | m Specific Sources. Ent | ter the four-digit number | from 40 CFR Part | 261.32 for ea | ach listed | hazardous | s waste from | | |
| specific sources your i | nstallation handles. Use | additional sheets if neces | | | | 11 1 | | | |
| 13 | 14 | 15 | 16 | | 17 | ++ | 18 | 345 | |
| | | | | | | | | | |
| 19 | 20 | 21 | 22 | | 23 | | 24 | | |
| | | | | | | | | | |
| | | | | | | _ | | 1500 | |
| | | | A STATE OF THE PERSONNEL PROPERTY AND A STATE OF | | 29 | | 30 | | |
| 25 | 26 | . 27 | 28 | | | 677 | | | |
| Commercial Chemica | Product Hazardous Wa | astes. Enter the four-digir dous waste. Use addition | number from 40 | CFR Part 261 sary. | 160% | ch chemic | | | |
| Commercial Chemica | Product Hazardous Wa | astes. Enter the four-digit | number from 40 | CFR Part 261 sary. | 33 for each | ch chemic | cal substance | | |
| Commercial Chemica your installation handle | I Product Hazardous Wa es which may be a hazar | astes. Enter the four-digir dous waste. Use addition | number from 40 al sheets if neces | CFR Part 261 sary. | 160% | ch chemic | | | |
| Commercial Chemica your installation handle 31 | I Product Hazardous Wa es which may be a hazar | astes. Enter the four-digit dous waste. Use addition | number from 40 al sheets if neces: | CFR Part 261 sary. | 35 | ch chemic | 36 | | |
| Commercial Chemical cour installation handle 31 37 | I Product Hazardous Wa es which may be a hazar | astes. Enter the four-digit dous waste. Use addition 33 | number from 40 al sheets if neces: 34 | CFR Part 261 sary. | 35 | ch chemic | 36 | Part of the last o | |
| Commercial Chemica our installation handle 31 | I Product Hazardous Wa es which may be a hazar | astes. Enter the four-digit dous waste. Use addition | number from 40 al sheets if neces: | CFR Part 261 sary. | 35 | ch chemic | 36 | | |
| Commercial Chemical your installation handled as 31 and 37 and 43 | I Product Hazardous Wales which may be a hazar | astes. Enter the four-digit dous waste. Use addition 33 39 | number from 40 al sheets if neces: | sary. | 35 41 47 47 | | 42 | | |
| Commercial Chemical your installation handle 31 37 43 | 32 38 38 44 | astes. Enter the four-digit dous waste. Use addition 33 39 45 | number from 40 al sheets if neces: 34 40 46 | hazardous w | 35 41 47 asste from I | | 42 | | |
| Commercial Chemical Your installation handle 31 37 43 43 Listed Infectious Was pitals, or medical and residual control of the state of | Teresearch laboratories you | astes. Enter the four-digination waste. Use addition 33 39 45 number from 40 CFR Partur installation handles. Use | number from 40 al sheets if neces: 34 40 46 261.34 for each see additional sheets | hazardous w | 35 41 47 aste from I | | 42 48 veterinary ho | | |
| Commercial Chemical cour installation handle 31 37 43 | 32 38 38 44 | astes. Enter the four-digit dous waste. Use addition 33 39 45 | number from 40 al sheets if neces: 34 40 46 | hazardous w | 35 41 47 asste from I | | 42 | | |

EPA Form 8700-12 (Rev. 11-85) Fleverse



HAZARDOUS MATERIALS
MANAGEMENT UNIT